

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 744698	RECEIPT DATE:	01 / 29 / 01
IA NUMBER:	PCT/ US99 / 16950	IA FILING DATE:	07 / 27 / 99
FAMILY NAME:	KIRWAN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	JOHN M.	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	07 / 27 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	F0397/7050	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX
NAME:	TIMOTHY J OYER		
	WOLF GREENFIELD & SACKS		
STREET:	600 ATLANTIC AVENUE		
CITY:	BOSTON		
STATE/COUNTRY:	MA	ZIP:	02210
EMAIL:			
APPLICATION TITLES:			
	UNIVERSAL MODULAR SURGICAL APPLICATOR SYSTEMS		

TAB TO LAST POSITION,PUSH SEND